STATEMENT OF

FORM 1	ORGANIZATION (See instructions)			Office use only	
NAME OF COMMITTEE (in 1)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	Onice use only	
AGL Resource	s Inc. Political Action Commi	ttee, Inc. (AGL PAC)			
ADDRESS (number and s	P.O. Box 4569				
_	Location 1519		111111		
(Check if address X is changed)	Atlanta		GA L	30302 _ 4569	
		CITY▲	STATE	ZIP CODE 📥	
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one	e e-mail address)			
(Check if address is changed)	shorton@aglreso	urces.com			
COMMITTEE'S WEB	PAGE ADDRESS (URL)				
(Check if address X is changed)					
2. DATE M M M 1.2 3. FEC IDENTIFICA	28 2009	C C00145037			
4. IS THIS STATEM			N)		
I certify that I have exami	ned this Statement and to the best of my	knowledge and belief it is true, corr	ect and complete		
Type or Print Name of	Treasurer Stacey Horton	1			
Signature of Treasurer	Electronically Filed by Stacey	Horton	Date 12	28 / 2009	
NOTE: Submission of fal	se, erroneous, or incomplete information ANY CHANGE IN INFORI	may subject the person signing this	·		
Office Use Only		For further informa Federal Election Co Toll Free 800-424-9	mmission 530	FEC FORM 1 (Revised 02/2009)	